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ATTORNEYS AT LAW PATENT AND TRADEMARK MATTERS

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FAX NUMBER: 571-273-8300

FROM:

Brian D. Walker

**SERIAL NO.:** 

09/801,150

FILED:

March 7, 2001

**OUR FILE:** 

NEXU-26,961

ATTACHED:

Transmittal (1); Fee Transmittal (1); Petition for Extension (1);

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Form (1)

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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to the (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and ST.CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Three will visity depending upon the inclinations can be smount of time you require to complete this form entitles for ending this burden, should be sent to the Chief information Officer. U.S. Patient and Trademark Office, U.S. Department of Commissioner P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Effective on 12/03/204  See nursuant to the Consolidated Appropriations Act 2005 (H.R. 4818).  FEE TRANSMITTAL  FOR FY 2005  Applicant claims small entity status. See 37 CFR 1.27  At Unit AMOUNT OF PAYMENT (\$) 905.00  Afternay  ETHOD OF PAYMENT (check all that apply)  Check Credit Card Money Order None Charge fee(s) Indicated below  Charge fee(s) Indicated below  Charge fee(s) Indicated below  Charge any additional fee(s) or underpayments of fee(s)  Under 37 CFR 1.8 and 1.17  RINING: Information on this form may become public. Credit card information end authorization on Fro-2018.  E CALCULATION  BASIC FILING, SEARCH, AND EXAMINATION FEES.  FILING FEES  Small Entity  Application Type  Fee(s) Fee(s) Fee(s) Fee(s) Fee(s)  Fee(s) Fee(s) Fee(s) Fee(s)  Possign  200 100 100 50  250  Phant  200 100 300 150  Provisional  200 100 300 150  EXCESS CLAIM FEES  Fee Description  Each independent claims over 3 (including Reissues)  Each independent claim over 3 (including Reissues)  Multiple dependent claims over 3 (including Reissues)  Multiple dependent claims over 3 (including Reissues)  Each independent claims over 3 (including Reissues)  Multiple dependent claims over 3 (including Reissues)  Each independent claims over 3 (including Reissues)  Multiple dependent claims over 3 (including Reissues)  First Fee Paid (s)  First National Reissues  First Glaims  Extra Claims  First (s)  First Paid (s)  First National Reissues  First Paid (s)  First National Reissues  First Schall R	, SAN RECEIVED "
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